

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	5/4/01
FORMALITY REVIEW	YF	956	05/18/01
RESPONSE FORMALITY REVIEW	STC	809	8-20-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	2-3-01
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	0
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	0
19	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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